## BEST AVAILABLE COPY

PATENT AP	PLICATION	FEE	DETERMINATION	RECORE
-----------	-----------	-----	---------------	--------

Effective October 1, 2000

Application or Docket Number 7/772-286

CLAIMS AS FILED - PART I (Column 1)— (Column 2)					SMALL ENTITY TYPE OR		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS		12				RATE	FEE	l	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			17 minus 20=		· Ø		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		· Ø		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	710	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						(Column 3)	SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	*	HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent -	*	Minus	***	T OL 1114		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JETIPLE DEP	ENDEN	CLAIM		+135=		OR	+270=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2) HEST	(Column 3)			1		<b>1</b> :
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	MBER NOUSLY D FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	IT CLAIR	<u> -</u>	X40=		OR	X80=	
L	HRSI PRESE	NTATION OF M	OLIPLE DEP	ENDEN	II CLAIM		+135=		OR	+270=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			umn 2)	(Column 3)	· · · ·				
AMENDMENT C	, j	CLAIMS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER /IOUSLY D FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent		Minus	***	UT OL 111	=	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDE	VI CLAIN	1	+135=		OR		
	If the entry in colu	mn 1 is less than	the entry in colu	mn 2, wi	rite "0" in c	olumn 3.	TOTAL	<b> </b>	OR	TOTAL	<u> </u>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											